

## REQUEST FOR A SPECIAL PROCESS VARIANCE SC Regulation 61-25 Retail Food Establishments

Date	:	Permit number (if applicable):
1.	Retail Food Establishment (RFE)/Organization	Name:
2.	Physical Address:	
	City:	State: Zip:
3.	If applying for multiple locations, please attach	a list of facilities to this application.
4.	Person in Charge (Owner)	Contact Telephone: ( )
5.	Email Address:	
1 S	PECIAL PROCESS (VARIANCE): 3-502.11	[] SPECIAL PROCESS (NO VARIANCE): 3-502.12
	moking Food for Preservation	
[ ] C	ustom Processing of Animals for Personal Use	[] Sous Vide
		[] Cook/Chill
		[] Preparing Food by Other Method (provide details below)
	cidification of Food other than Sushi Rice	ian' fan Carli Dian anla
	E: Use "Request for a Special Process – Sushi R	•
Spec	ify "other" request:	
Per I	Regulation 61-25, Section 8-103.10 - Modification	ns and Waivers
	e ,	odifying or waiving the requirements of this regulation if, in the opinion
		ce will not result from the variance. If a variance is granted, the
		rified under 8-103.11 in its records for the retail food establishment.
Refo	•	on is approved, the information provided by the retail food establishment
	esting the variance and retained in the Departmen	
		regulation requirement citing relevant regulation section(s);
	(B) An analysis of the rationale for how the pote regulation sections will be alternatively addre	ential public health hazards and nuisances addressed by the relevant ressed by the proposal; and
-	(C) A HACCP plan if required as specified unde relevant to the variance requested.	er 8-201.13(A) that includes information specified under 8-201.14 as it is
Q_1/1	3.12 Conformance with Approved Proced	lirac
		8-103.10, the permit holder shall comply with the procedures that are
subn	nitted and approved as a basis for the modification	n or waiver, and demonstrate the effectiveness of the operation.
	RFE Person in Charge (Owner)	
		tion and supporting documentation to:
	Food Protection Program/Variance Committee	Division of Food Protection and Rabies Prevention
	FoodVariances@dhec.sc.gov	Bureau of Environmental Health Services
		2600 Bull Street, Columbia, SC 29201
	n you nave quest	tions, please contact us at (803) 896-0640
	TION BY THE DEPARTMENT	_
The !	Department has reviewed the request for a varian	ice. The variance is hereby:   APPROVED  DENIED
	DDITIONAL INFORMATION REQUIRED	
Com	ments if necessary:	
	DHEC Representative Signature	